

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines
STRAIGHT TALK AMERICA

ADDRESS (number and street) PO Box 9785
 Check if different than previously reported. (ACC)
ALEXANDRIA VA 22304

2. **FEC IDENTIFICATION NUMBER** C00413245
3. IS THIS REPORT NEW (N) **OR** AMENDED (A)

4. **TYPE OF REPORT** (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report(Q1)
 July 15 Quarterly Report(Q2)
 October 15 Quarterly Report(Q3)
 January 31 Quarterly Report(YE)
 July 31 Mid-Year Report(Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On: Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day **PRE-Election** Report for the: Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12G)
Election on _____ in the State of _____
(d) 30-Day **Post -Election** Report for the: General (30G) Runoff (30R) Special (30S)
Election on _____ in the State of _____

5. Covering Period 01 01 2007 through 01 31 2007

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Keith Davis

Signature of Treasurer Electronically Filed by Keith Davis Date 03 20 2007

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name
STRAIGHT TALK AMERICA

Report Covering the Period: From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To:

M	M
0	1

D	D
3	1

Y	Y	Y	Y
2	0	0	7

	COLUMN A This Period	COLUMN B Calendar Year-to-Date										
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>7</td></tr></table>	Y	Y	Y	Y	2	0	0	7	<table border="1" style="width: 100%;"><tr><td> </td></tr></table>		<table border="1" style="width: 100%;"><tr><td align="right">33386.58</td></tr></table>	33386.58
Y	Y	Y	Y									
2	0	0	7									
33386.58												
(b) Cash on Hand at Beginning of Reporting Period	<table border="1" style="width: 100%;"><tr><td align="right">33386.58</td></tr></table>	33386.58										
33386.58												
(c) Total Receipts (from Line 19)	<table border="1" style="width: 100%;"><tr><td align="right">30895.99</td></tr></table>	30895.99	<table border="1" style="width: 100%;"><tr><td align="right">30895.99</td></tr></table>	30895.99								
30895.99												
30895.99												
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	<table border="1" style="width: 100%;"><tr><td align="right">64282.57</td></tr></table>	64282.57	<table border="1" style="width: 100%;"><tr><td align="right">64282.57</td></tr></table>	64282.57								
64282.57												
64282.57												
7. Total Disbursements (from Line 31)	<table border="1" style="width: 100%;"><tr><td align="right">19200.61</td></tr></table>	19200.61	<table border="1" style="width: 100%;"><tr><td align="right">19200.61</td></tr></table>	19200.61								
19200.61												
19200.61												
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	<table border="1" style="width: 100%;"><tr><td align="right">45081.96</td></tr></table>	45081.96	<table border="1" style="width: 100%;"><tr><td align="right">45081.96</td></tr></table>	45081.96								
45081.96												
45081.96												
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	<table border="1" style="width: 100%;"><tr><td align="right">10898.06</td></tr></table>	10898.06										
10898.06												
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	<table border="1" style="width: 100%;"><tr><td align="right">183971.09</td></tr></table>	183971.09										
183971.09												

This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

**DETAILED SUMMARY PAGE
OF RECEIPTS**

Write or Type Committee Name
STRAIGHT TALK AMERICA

Report Covering the Period: From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To:

M	M
0	1

D	D
3	1

Y	Y	Y	Y
2	0	0	7

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	17000.00	17000.00
(i) Itemized (use Schedule A)	1442.79	1442.79
(ii) Unitemized	18442.79	18442.79
(iii) TOTAL (add Lines 11(a)(i) and (ii)	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	18442.79	18442.79
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	12453.20	12453.20
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	30895.99	30895.99
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	30895.99	30895.99

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	19125.61	19125.61
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	19125.61	19125.61
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	75.00	75.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	75.00	75.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	19200.61	19200.61
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	19200.61	19200.61

DETAILED SUMMARY PAGE
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	18442.79	18442.79
34. Total Contribution Refunds (from Line 28(d))	75.00	75.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	18367.79	18367.79
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	19125.61	19125.61
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	19125.61	19125.61

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 20
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
STRAIGHT TALK AMERICA

A. Full Name (Last, First, Middle Initial) Mrs. Kristen Hayler Hertel		Date of Receipt M M / D D / Y Y Y Y 0 1 / 3 1 / 2 0 0 7	
Mailing Address 419 Sheridan Road		Transaction ID: SA11A1.97091	
City State Zip Code Winnetka IL 60093	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. C	Contribution		
Name of Employer Bank One	Occupation Banker		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00		

B. Full Name (Last, First, Middle Initial) Mr. Peter R. Kemmerer		Date of Receipt M M / D D / Y Y Y Y 0 1 / 3 1 / 2 0 0 7	
Mailing Address 37 North Main Street		Transaction ID: SA11A1.97068	
City State Zip Code Cranbury NJ 08512	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C	Contribution		
Name of Employer Mesa Verde, Inc.	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

C. Full Name (Last, First, Middle Initial) Dr. Angus M. McBryde		Date of Receipt M M / D D / Y Y Y Y 0 1 / 1 0 / 2 0 0 7	
Mailing Address 604 Dexter Avenue		Transaction ID: SA11A1.97080	
City State Zip Code Birmingham AL 35213	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C	Contribution		
Name of Employer MUSC	Occupation Physician		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

SUBTOTAL of Receipts This Page (optional) ▶	7000.00
TOTAL This Period (last page this line number only) ▶	[]

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: <input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	PAGE 7 / 20
	(check only one)	
	<input checked="" type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
STRAIGHT TALK AMERICA

A. Full Name (Last, First, Middle Initial)
Mr. Muneer A. Satter

Mailing Address 71 South Wacker Drive
Ste 500

City State Zip Code
Chicago IL 60606

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Goldman, Sachs and Co. VP

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 1 / 3 1 / 2 0 0 7

Transaction ID: SA11A1.97073

Amount of Each Receipt this Period
5000.00

Contribution

B. Full Name (Last, First, Middle Initial)
Mrs. Corine Trujillo

Mailing Address 6400 South Fiddlers Green Circ
Ste 1200

City State Zip Code
Greenwood Village CO 80111

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 1 / 3 1 / 2 0 0 7

Transaction ID: SA11A1.97065

Amount of Each Receipt this Period
5000.00

Contribution

SUBTOTAL of Receipts This Page (optional)	▶	10000.00
TOTAL This Period (last page this line number only)	▶	17000.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 8 / 20
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
STRAIGHT TALK AMERICA

A. Full Name (Last, First, Middle Initial)
HEATHER WILSON FOR CONGRESS

Mailing Address PO Box 14070

City State Zip Code
Albuquerque NM 87191

FEC ID number of contributing federal political committee. **C** C00334060

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
12453.20

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	0	6	/	2	0	0	7

Transaction ID: SA17.97149

Amount of Each Receipt this Period
12453.20

Travel Reimbursement

SUBTOTAL of Receipts This Page (optional)	▶	12453.20
TOTAL This Period (last page this line number only)	▶	12453.20

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial) A. Avaya		Transaction ID: SB21B.97128 Date of Disbursement 01 / 11 / 2007
Mailing Address PO Box 93000		Amount of Each Disbursement this Period 342.60
City Chicago	State IL Zip Code 60673-3000	
Purpose of Disbursement Equipment Lease		001 Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Caplin & Drysdale		Transaction ID: SB21B.97150 Date of Disbursement 01 / 03 / 2007
Mailing Address One Thomas Circle, NW Ste. 1100		Amount of Each Disbursement this Period 1152.82
City Washington	State DC Zip Code 20005	
Purpose of Disbursement Consulting-Legal		001 Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Care First Blue Cross Blue Shield		Transaction ID: SB21B.97129 Date of Disbursement 01 / 03 / 2007
Mailing Address PO Box 79749		Amount of Each Disbursement this Period 392.00
City Baltimore	State MD Zip Code 21279	
Purpose of Disbursement Health Insurance		001 Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	1887.42
TOTAL This Period (last page this line number only) ▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial) A. Courtney Nahigian		Transaction ID: SB21B.97133 Date of Disbursement 01 / 11 / 2007
Mailing Address 331 Cameron Station Blvd.		Amount of Each Disbursement this Period 3201.90
City Alexandria State VA Zip Code 22304	001 Category/ Type	
Purpose of Disbursement Salaries Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Courtney Nahigian		Transaction ID: SB21B.97134 Date of Disbursement 01 / 31 / 2007
Mailing Address 331 Cameron Station Blvd.		Amount of Each Disbursement this Period 3201.90
City Alexandria State VA Zip Code 22304	001 Category/ Type	
Purpose of Disbursement Salaries Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Paychex		Transaction ID: SB21B.97127 Date of Disbursement 01 / 11 / 2007
Mailing Address 7450 Tilghman St., Ste. 107		Amount of Each Disbursement this Period 1799.40
City Allentown State PA Zip Code 18106-9037	001 Category/ Type	
Purpose of Disbursement Employer Contrib P/R Tax Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	8203.20
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial) A. Paychex		Transaction ID: SB21B.97126
Mailing Address 7450 Tilghman St., Ste. 107		Date of Disbursement 01 / 31 / 2007
City Allentown	State PA	Zip Code 18106-9037
Purpose of Disbursement Employer Contrib P/R Tax	001 Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 1756.50	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Southwest Publishing and Mailing Corp.		Transaction ID: SB21B.97156
Mailing Address 2600 NW Topeka Blvd.		Date of Disbursement 01 / 22 / 2007
City Topeka	State KS	Zip Code 66617
Purpose of Disbursement Direct Mail-Production	003 Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 1770.12	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Strategic Telecommunications		Transaction ID: SB21B.97152
Mailing Address 7591 9th Street North		Date of Disbursement 01 / 03 / 2007
City Oakdale	State MN	Zip Code 55128
Purpose of Disbursement Telemarketing	003 Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 4470.10	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional)	7996.72
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 12 / 20

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

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NAME OF COMMITTEE (In Full)
STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial)

A. The Computer Workshop

Mailing Address 3223 Brookings Court

City State Zip Code
Fairfax VA 22031

Purpose of Disbursement
Computer Services

Candidate Name

001
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB21B.97122

Date of Disbursement

01 / 11 / 2007

Amount of Each Disbursement this Period

210.00

SUBTOTAL of Disbursements This Page (optional) ►

210.00

TOTAL This Period (last page this line number only) ►

18297.34

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/>	9
<input type="checkbox"/>	10

NAME OF COMMITTEE (In Full)
STRAIGHT TALK AMERICA

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor HEATHER WILSON FOR CONGRESS	Nature of Debt (Purpose): Travel - Airfare
Mailing Address PO Box 14070	
City State ZIP Code Albuquerque NM 87191	

Outstanding Balance Beginning This Period 12453.20	Transaction ID: SD9.96356	
Amount Incurred This Period 0.00	Payment This Period 12453.20	Outstanding Balance at Close of This Period 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor HEATHER WILSON FOR CONGRESS	Nature of Debt (Purpose): Travel - Airfare and Lodging
Mailing Address PO Box 14070	
City State ZIP Code Albuquerque NM 87191	

Outstanding Balance Beginning This Period 454.80	Transaction ID: SD9.96368	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 454.80

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Karen Floyd 2006 Campaign	Nature of Debt (Purpose): Travel-Airfare
Mailing Address 113 West Main Street	
City State ZIP Code Spartanburg SC 29306	

Outstanding Balance Beginning This Period 791.23	Transaction ID: SD9.96364	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 791.23

1) SUBTOTALS This Period This Page (optional).....	1246.03
2) TOTALS This Period (last page this line number only).....	
3) TOTALS OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 14 / 20	
	FOR LINE NUMBER: (check only one)	<input checked="" type="checkbox"/> 9 <input type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
STRAIGHT TALK AMERICA

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor MIKE DEWINE FOR US SENATE	Nature of Debt (Purpose): Travel-Airfare
Mailing Address PO Box 340188	
City State ZIP Code Columbus OH 43234	

Outstanding Balance Beginning This Period <input type="text" value="9279.83"/>	Transaction ID: SD9.96363	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="9279.83"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor SCHWARZ FOR CONGRESS	Nature of Debt (Purpose): Travel-Airfare
Mailing Address 6123 W. Saginaw Hwy.	
City State ZIP Code Lansing MI 49016	

Outstanding Balance Beginning This Period <input type="text" value="372.20"/>	Transaction ID: SD9.77251	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="372.20"/>

1) SUBTOTALS This Period This Page (optional).....	<input type="text" value="9652.03"/>
2) TOTALS This Period (last page this line number only).....	<input type="text" value="10898.06"/>
3) TOTALS OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 15 / 20
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
STRAIGHT TALK AMERICA

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor American Express	Nature of Debt (Purpose): Credit Card Travel/Admini- strative Charge
Mailing Address PO Box 1270	
City State ZIP Code Newark NJ 07101-1270	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>	Transaction ID: SD10.97173	
Amount Incurred This Period <input type="text" value="2401.04"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="2401.04"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Caplin & Drysdale	Nature of Debt (Purpose): Consultant-Legal
Mailing Address One Thomas Circle, NW Ste. 1100	
City State ZIP Code Washington DC 20005	

Outstanding Balance Beginning This Period <input type="text" value="9343.37"/>	Transaction ID: SD10.96339	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="9343.37"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Caplin & Drysdale	Nature of Debt (Purpose): Consulting-Legal
Mailing Address One Thomas Circle, NW Ste. 1100	
City State ZIP Code Washington DC 20005	

Outstanding Balance Beginning This Period <input type="text" value="1152.82"/>	Transaction ID: SD10.97045	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="1152.82"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

1) SUBTOTALS This Period This Page (optional).....	<input type="text" value="11744.41"/>
2) TOTALS This Period (last page this line number only).....	<input type="text"/>
3) TOTALS OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
STRAIGHT TALK AMERICA

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Caplin & Drysdale	Nature of Debt (Purpose): Consultant-Legal
Mailing Address One Thomas Circle, NW Ste. 1100	
City State ZIP Code Washington DC 20005	

Outstanding Balance Beginning This Period 0.00	Transaction ID: SD10.97158	
Amount Incurred This Period 3006.40	Payment This Period 0.00	Outstanding Balance at Close of This Period 3006.40

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Federal Express	Nature of Debt (Purpose): Shipping
Mailing Address PO Box 371461	
City State ZIP Code Pittsburgh PA 15250-7461	

Outstanding Balance Beginning This Period 0.00	Transaction ID: SD10.97159	
Amount Incurred This Period 207.86	Payment This Period 0.00	Outstanding Balance at Close of This Period 207.86

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Huckaby Davis Lisker	Nature of Debt (Purpose): Consultant-Compliance/Accounting
Mailing Address 228 S. Washington St., Suite 115	
City State ZIP Code Alexandria VA 22314	

Outstanding Balance Beginning This Period 0.00	Transaction ID: SD10.97163	
Amount Incurred This Period 9000.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 9000.00

1) SUBTOTALS This Period This Page (optional).....	▶	12214.26
2) TOTALS This Period (last page this line number only).....	▶	
3) TOTALS OUTSTANDING LOANS from Schedule C (last page only).....	▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	▶	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
STRAIGHT TALK AMERICA

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Integrated Web Strategy, LLC			Nature of Debt (Purpose): Consulting-Web/Internet
Mailing Address 4715 N. 32nd Street, Ste. 107			
City State ZIP Code Phoenix AZ 85018			

Outstanding Balance Beginning This Period 1550.00	Transaction ID: SD10.96343	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1550.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Southwest Publishing and Mailing Corp.			Nature of Debt (Purpose): Direct Mail-Postage/Production
Mailing Address 2600 NW Topeka Blvd.			
City State ZIP Code Topeka KS 66617			

Outstanding Balance Beginning This Period 85575.79	Transaction ID: SD10.86868	
Amount Incurred This Period 0.00	Payment This Period 1770.12	Outstanding Balance at Close of This Period 83805.67

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Southwest Publishing and Mailing Corp.			Nature of Debt (Purpose): Direct Mail-Postage/Production
Mailing Address 2600 NW Topeka Blvd.			
City State ZIP Code Topeka KS 66617			

Outstanding Balance Beginning This Period 16648.18	Transaction ID: SD10.96351	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 16648.18

1) SUBTOTALS This Period This Page (optional).....	102003.85
2) TOTALS This Period (last page this line number only).....	
3) TOTALS OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
STRAIGHT TALK AMERICA

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Strategic Telecommunications	Nature of Debt (Purpose): Telemarketing
Mailing Address 7591 9th Street North	
City State ZIP Code Oakdale MN 55128	

Outstanding Balance Beginning This Period 59136.10	Transaction ID: SD10.96353	
Amount Incurred This Period 0.00	Payment This Period 4470.10	Outstanding Balance at Close of This Period 54666.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor T&M Protection Resources	Nature of Debt (Purpose): Security
Mailing Address 42 Broadway, Ste. 1630	
City State ZIP Code New York NY 10004	

Outstanding Balance Beginning This Period 0.00	Transaction ID: SD10.97161	
Amount Incurred This Period 1200.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1200.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor The Dennehy Group	Nature of Debt (Purpose): Travel Reimbursement
Mailing Address 11 Depot Street, Ste. 2	
City State ZIP Code Concord NH 03301	

Outstanding Balance Beginning This Period 0.00	Transaction ID: SD10.97164	
Amount Incurred This Period 2017.30	Payment This Period 0.00	Outstanding Balance at Close of This Period 2017.30

1) SUBTOTALS This Period This Page (optional).....	▶	57883.30
2) TOTALS This Period (last page this line number only).....	▶	
3) TOTALS OUTSTANDING LOANS from Schedule C (last page only).....	▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	▶	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 19 / 20
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
STRAIGHT TALK AMERICA

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor John Weaver	Nature of Debt (Purpose): Meeting Expense-Meals
Mailing Address 337 West 12th Street	
City State ZIP Code New York NY 10014	

Outstanding Balance Beginning This Period	Transaction ID: SD10.97160	
0.00		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
125.27	0.00	125.27

1) SUBTOTALS This Period This Page (optional).....	125.27
2) TOTALS This Period (last page this line number only).....	183971.09
3) TOTALS OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	

Form/Schedule: **F3XA**

Transaction ID:

The Committee wishes to disclose the following: 1) No expenditures disclosed on Schedule B, Line 21b were made on behalf of any specifically identified federal candidate. All expenditures made on behalf of a specifically identified federal candidate have been disclosed on Schedule B, Line 23. 11 CFR 104.3 (b) and 106.1 2) No expenditures disclosed on Schedule B, Line 21b were made for public communications (as defined by 11 CFR 100.26) or voter drive activity (under 11 CFR 106.6(b)(2)(i)) containing express advocacy as defined under 11 CFR 100.22 and thus did not constitute in-kind contributions or independent expenditures. 3) The committee has reviewed all travel and subsistence expenditures, and reviewed the reporting requirements outlined at 11 CFR 104.9 and in the instructions for Schedule B. There is no further itemization required under any Commission regulation for these expenditures.

Form/Schedule: **SD10**

Transaction ID: **SD10.97173**

This invoice was never delivered to the Committee because the Committee moved its offices. On February 17, 2007, the Committee paid the balance in full on the invoice dated February 6, 2007 without realizing that an invoice was missing. The detail of the charges was obtained from the vendor recently. The report is being amended to correctly reflect the Debts and Obligations Owed by the Committee for the period January 1 through January 31, 2007.